

Dear Parents,

The AMS 8th Grade Band, Jazz Band and Melody Club will be taking a trip to perform in the Trills & Thrills Music Festival on Friday, May 28th. The performance will take place in East Longmeadow, MA. Each group will be judged by a panel and given a score. At the end of the performance, all the judges' feedback will be given to us and we will (hopefully) receive a trophy or plaque. Once all of the groups perform, the remainder of the day will be spent at Six Flags New England.

This will be the first time the middle school has performed in a competition like this. It's a great way for the student to show how far they have come and to be able to show off their trophy to the community. These students have worked very hard over the past few years and they deserve to spread the sound, while also having fun!

We are asking every student that would like to participate in this festival please make a **\$20 deposit by January 25th** so we can reserve the busses and our performance time. The total cost of the trip is dependant on how many people will be going and how much money we raise from fundraising. With all the students going and no fundraising, the trip would cost about \$85, but we'd like to cut as much as we can off from that. A detailed itinerary will be given once we have an idea of how many students will be participating.

We will also need a few chaperones to come with us. Please let us know if you would like to be considered for chaperoning. Please detach the following form and return it to Mr. Fijalkowski by January 25th.

Thank you!

Dan Fijalkowski, Band Director
Liana Hill, Chorus Director

Student's Name _____ Grade _____

_____ Yes, I would like my child to participate in the field trip on May 28th. Here is the \$20 deposit. Please make checks payable to AMS.

_____ Yes, I would like my child to participate in the field trip on May 28th and I am interested in chaperoning. Here is the \$20 deposit. Please make checks payable to AMS.

_____ No, my child will not be participating in the festival.

Parent signature _____

E-mail address or phone number (if interested in chaperoning) _____